## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

| CLAIMS AS FILED - PART I   |  |   |              |                                    |                |                                       |       | SMALL ENTITY       |  |       | OTHER THAN         |                        |  |
|--|--|---|--------------|------------------------------------|----------------|---------------------------------------|-------|--------------------|--|-------|--------------------|------------------------|--|
| (Column 1) (Column 1) TOTAL CLAIMS   |  |   |              |                                    |                |                                       | 1 .   | TYPE [             |  | OR    | SMALL              | ENTITY                 |  |
| TOTAL CLAIMS   |  |   | 54           |                                    |                | · · · · · · · · · · · · · · · · · · · |       | RATE               | FEÉ  | ]     | RATE               | FEE                    |  |
| FOR  |  |   | NUMBER FILED |                                    | NUMB           | NUMBER EXTRA                          |       | BASIC FE           | E 385.00                                     | OR    | BASIC FEE          | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | 54 m         | inus 20= .                         | • 34           |                                       |       | X\$ 9=             |  | OR    | X\$18=             | 612                    |  |
| INDEPENDENT CLAIMS   |  |   | 7 "          | ninus 3 =                          | * '            | 4                                     |       | X43=               |  | OR    | X86=               | 344                    |  |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |              |                                    |                |                                       |       | +145=              | · ·  | OR    | +290=              |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |              |                                    |                | . !                                   | TOTAL |                    | OR   | TOTAL | 1726               |                        |  |
| CLAIMS AS AMENDED - PART II  |  |   |              |                                    |                |                                       |       |                    | <del></del>                                  |       | OTHER              |                        |  |
|  |  | (Column 1)                                | (Colun       | nn 2)                              | (Column 3)     |                                       | SMALL | ENTITY             | OR   | SMALL |                    |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHI<br>NUME<br>PREVIO<br>PAID F  | BER<br>JUSLY   | PRESENT<br>EXTRA                      |       | RATE               | ADDI-<br>TIONAL<br>FEE                       |       | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus        | **                                 |                | =                                     |       | X\$ 9=             |  | OR    | X\$18=             |                        |  |
|  | Independent  | *   | Minus        | ***                                |                | =                                     |       | X43=               |  | OR    | X86=               |                        |  |
| L  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                       |   |              |                                    |                |                                       |       | +145=              |  | OR    | +290=              |                        |  |
|  |  |   |              |                                    | •              |                                       | L     | TOTAL              | -  |       | TOTAL              |                        |  |
|  |  | . (0-1: 4)                                |              |                                    | ,<br><b></b> . | (0.1                                  | Ą     | DDIT. FEE          | <u>.                                    </u> |       | ADDIT. FEE         |                        |  |
| ·  |  | (Column 1)<br>CLAIMS                      |              | (Colum                             |                | (Column 3)                            |       |                    | 455  | 1 1   | · · · · · ·        |                        |  |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |              | NUMB<br>PREVIO<br>PAID F           | USLY           | PRESENT<br>EXTRA                      |       | RATE               | ADDI-<br>TIONAL<br>FEE                       |       | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus        | **                                 |                | =                                     |       | X\$ 9=             |  | OR    | X\$18=             |                        |  |
|  | Independent  | <b>*</b> ·                                | Minus        | ***                                |                | = .                                   |       | X43=               | <del></del>                                  | OR    | X86=               |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                       |   |              |                                    |                |                                       | -     |                    |  |       |                    |                        |  |
|  |  |   |              |                                    |                |                                       | L     | +145=              |  | OR    | +290=              |                        |  |
|  |  |   |              |                                    |                |                                       |       | TOTAL<br>DDIT. FEE |  | OR ,  | TOTAL<br>ODIT. FEE |                        |  |
|  | (Column 1) (Column 2) (Column 3)   |   |              |                                    |                |                                       |       |                    |  |       |                    |                        |  |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | HIGHE<br>NUMB<br>PREVIOU<br>PAID F | ER<br>USLY     | PRESENT<br>EXTRA                      |       | RATE               | ADDI-<br>TIONAL<br>FEE                       |       | RATE               | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | *   | Minus        | **                                 |                | =                                     | Γ     | X\$ 9=             |  | OR    | X\$18=             |                        |  |
|  | Independent  | *   | Minus        | ***                                |                | =                                     | H     | X43=               |  |       | X86=               |                        |  |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM                                       |   |              |                                    |                |                                       |       | -                  |  | OR    |                    |                        |  |
| * 14   | * If the entry in column 1 is less than the entry in column 2, write "0" in column 3 |   |              |                                    |                |                                       |       |                    | ٠.   | OR    | +290=              |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3:"  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |  |   |              |                                    |                |                                       |       |                    |  |       |                    |                        |  |